

WATER AVAILABILITY APPLICATION (W.A.A.)

FOR BUILDING PERMIT

AN OVERALL **SITE PLAN** SHOWING
PROPOSED WATER MAINS AND
WATER SERVICES MUST BE
ATTACHED AND SUBMITTED WITH
THIS APPLICATION FORM.

GREATER CINCINNATI WATER WORKS
ENGINEERING DIVISION
4747 SPRING GROVE AVE.
CINCINNATI, OH 45232-1986
(513) 591-7859
Fax (513) 591-7878

APPLICATION NO. _____

BUILDING DEPARTMENT JURISDICTION _____

COMMUNITY _____

THIS FORM MUST BE SUBMITTED TO GCWW FOR
ANY CONSTRUCTION WORK, EVEN IF WATER
SERVICE IS NOT DESIRED OR IF EXISTING
WATER SERVICE IS IMPACTED.

IDENTIFICATION	NAME	ADDRESS, CITY, STATE, ZIP	PHONE NO.
OWNER			
GENERAL CONTRACTOR			
PLANS BY			
SUBMITTED BY			

COUNTY AUDITOR'S BOOK _____ PAGE _____ PARCEL _____ LOT _____

PROJECT ADDRESS _____

TYPE OF BUILDING/LAND USE (CHECK ALL APPROPRIATE ITEMS)

<input type="checkbox"/> RESIDENTIAL, 1-3 FAMILY	<input type="checkbox"/> EDUCATIONAL BUILDING	<input type="checkbox"/> LIGHT INDUSTRIAL
<input type="checkbox"/> RESIDENTIAL, MULTIPLE FAMILY	<input type="checkbox"/> INSTITUTIONAL/MEDICAL	<input type="checkbox"/> FACTORY/INDUSTRIAL
<input type="checkbox"/> LIGHT BUSINESS/COMMERCIAL	<input type="checkbox"/> ASSEMBLY BUILDING	<input type="checkbox"/> HIGH HAZARD
<input type="checkbox"/> HEAVY BUSINESS/COMMERCIAL	<input type="checkbox"/> STORAGE BUILDING	<input type="checkbox"/> GOVERNMENT
<input type="checkbox"/> OTHER _____		

CHECK ALL BOXES THAT APPLY:

☐ APPLICANT WILL USE EXISTING WATER SERVICE ACCOUNT # _____

☐ APPLICANT WILL REQUEST NEW DOMESTIC WATER SERVICE AND MAKE SEPARATE APPLICATION FOR WATER SERVICE AT GCWW BRANCH SERVICE SECTION

☐ APPLICANT WILL REQUEST NEW FIRE SERVICE AND MAKE SEPARATE APPLICATION FOR WATER SERVICE AT GCWW BRANCH SERVICE SECTION
NEEDED FIRE FLOWS FROM PUBLIC WATER SYSTEM _____ (G.P.M.) AT 20 P.S.I., FROM LICENSED FIRE SPRINKLER CONTRACTOR
ACCEPTABLE TO THE LOCAL FIRE AUTHORITY AND GCWW.

☐ APPLICANT DESIRES NO WATER SERVICE TAP FROM GCWW
____ USING CISTERN; ____ USING WELL; ____ STRUCTURE NOT FOR HUMAN HABITATION

The undersigned owner of this building or agent of the owner hereby certifies that the information and statements given on the application, drawings and specifications are, to the best of his/her knowledge, correct and acknowledges the action taken on this application does not constitute approval for sizing, metering and/or cross connection control or for other requirements of the GCWW Rules and Regulations.

Owner is reminded to make application for water service at the GCWW Branch Services Counter at the same address as above. GCWW current standards for branch materials will apply.

SIGNATURE _____ TITLE _____

COMPANY NAME _____ DATE _____

DAYTIME PHONE NUMBER _____ DAYTIME FAX NUMBER _____

*****FOR GCWW USE ONLY*****

☐ **WATER IS AVAILABLE**

☐ **WATER CAN BE MADE AVAILABLE SUBJECT TO THE FOLLOWING CONDITIONS BEING MET PRIOR TO THE GCWW
ACCEPTANCE OF A WATER SERVICE BRANCH APPLICATION**

☐ **WATER IS NOT AVAILABLE**

EXPLANATION: _____

APPLICATION REVIEWED BY _____

TITLE _____

DATE _____